

## PART B - FEE(S) TRANSMITTAL



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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. 7	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must		
5514 7590 11/16/2004				have its own certification	have its own certificate of mailing or transmission.		
FITZPATRICK (	CELLA HARPER &	SCINTO	C	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United			
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TEB OB TOTAL TELE			EEI C		(Depositor's name)		
					(Signature)		
	B.	*				(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/678,253	10/03/2000	Hideo Honma		nma	35.C14856	4780	
TITLE OF INVENTION: OUTPUT CONTROL METHOD AND APPARATUS, AND STORAGE MEDIUM							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1370		\$0	\$1370	02/16/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
AGGARWAL, YOGESH K		2615		348-333050	_		
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list  CFR 1 363)  Fitzpatrick, Cella;							
(1) the names of up to 3 registered patent attorneys						-	
Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a							
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	RESIDENCE DATA TO B						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGN	EE	(B	(B) RESIDENCE: (CITY and STATE OR COUNTRY)  1400.00 0P				
Canon Kabushiki Kaisha			Tokyo, Japan 01 FC:1501 15.00 0P				
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the pate	ent): 🔲 Individual 🍱	Corporation or other private gro	oup entity Government	
4a. The following fee(s) are enclosed:  4b. Paymer				ment of Fee(s):			
Jssue Fee			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies5			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form).				
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	MALL ENTITY status. See	<del> </del>		<del></del>	ALL ENTITY status. See 37 C		
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Authorized Signature	anne Mr. Ma	ha			ebruary 8, 2005		
Typed or printed name Anne M. Maher			Registration No38,231				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							